ISDH Annual Fiscal Report of a Nonprofit Acute Care Hospital

Hospital: St. Joseph Regional Medical Hospital Mishawaka

Year: 2003 City: Mishawaka Peer Group: Medium

Statement One: Summary of Revenue and Expenses

1. Gross Patient Service Revenue						
Inpatient Patient Service Revenue	\$52,488,000					
Outpatient Patient Service Revenue	\$63,612,000					
Total Gross Patient Service Revenue	\$116,100,000					
2. Deductions from Revenue						
Contractual Allowances	\$60,566,000					
Other Deductions	\$2,775,000					
Total Deductions	\$63,341,000					
3. Total Operating Revenue						
Net Patient Service Revenue	\$52,758,000					
Other Operating Revenue	\$1,685,000					
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4. Operating Expenses					
Salaries and Wages	\$21,441,000				
Employee Benefits and Taxes	\$5,674,000				
Depreciation and Amortization	\$1,948,000				
Interest Expenses	\$1,303,000				
Bad Debt	\$2,767,000				
Other Expenses	\$28,274,000				
Total Operating Expenses	\$61,407,000				
5. Net Revenue and Expo	enses				
Net Operating Revenue over Expenses	(\$6,964,000)				
Net Non-operating Gains over Losses	\$30,000				
Total Net Gain over Loss	(\$6,934,000)				

Total Operating Revenue	\$54,443,000
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6. Assets and Liabilities				
Total Assets	\$34,365,000			
Total Liabilities	\$41,359,000			

Statement Two: Contractual Allowances						
Revenue Source	Gross Patient Revenue	Contractual Allowances	Net Patient Service Revenue			
Medicare	\$53,948,000	\$33,828,000	\$20,120,000			
Medicaid	\$12,054,000	\$8,308,000	\$3,746,000			
Other State	\$0	\$0	\$0			
Local Government	\$0	\$0	\$0			
Commercial Insurance	\$50,098,000	\$21,206,000	\$28,892,000			
Total	\$116,100,000	\$63,342,000	\$52,758,000			

Statement Three: Unique Specialized Hospital Funds						
Fund Category	Estimated Incoming Revenue from Others	Estimated Outgoing Expenses to Others	Net Dollar Gain or Loss after Adjustment			
Donations	\$314,000	\$250,000	\$64,000			

Educational	\$193,000	\$371,000	(\$178,000)
Research	\$0	\$0	\$0

Number of individuals estimated by this hospital that are involve	ed in education
Number of Medical Professionals Trained In This Hospital	105
Number of Hospital Patients Educated In This Hospital	92,000
Number of Citizens Exposed to Health Education Message	200,000

Statement Four Annual Summarized Community Benefit Statement on Nonprofit Hospital

This hospital is a nonprofit organization and files an annual community benefit statement with the Department under Indiana Code 16-21-9. Each nonprofit hospital must confirm its mission statement, document the number of persons and dollars allocated under its adopted charity care policy, and describe the progress of the community to achieve specific objectives set by the hospital.

County	St. Joseph	Community	Services to specific communities in Elkhart, Marshall,
Location		Served	and St. Joseph counties in Indiana and Berrien and Cass
			counties in Michigan.

Hospital Mission Statement

We serve together in Trinity Health in the spirit of the Gospel to head body, mind, and spirit to improve the health of our communities and to steward the resources entrusted to us.

Unique Services	Type of Initiatives	Document Available

Medical Research	NO	Disease Detection	YES	Community Plan	YES
Professional Education	NO	Practitioner Education	NO	Annual Statement	NO
Community Education	YES	Clinic Support	YES	Needs Assessment	1997

Allocation of Dollars and Persons Served under Adopted Charity Policy

Most nonprofit hospitals adopt a charity benefit policy to serve the medically indigent. On an annual basis, the hospital will confirm the eligibility and set aside dollars to ensure low-income persons can be offered needed inpatient and outpatient hospital services.

	2001	2002	2003
Persons served in last twelve months	NR	NR	NR
Charity Care Allocation	(\$158,000)	(\$869,000)	(\$1,211,000)

Hospital Community Benefit Projects and the Projects' Net Cost

On an annual basis, all nonprofit hospitals will report on the progress that the local community has made in reducing the incidence of disease and improving the delivery of health services in the community.

Name of Program and Description of Progress Made in Achieving Annual Objectives	Net Costs of Programs
All programs	(\$108,000)

Summary of Unreimbursed Costs of Charity Care, Government Funded Programs, and Community Benefits

Based on uniform definitions of costs, each nonprofit hospital must identify the costs of serving its community that are not reimbursed by government and other third party payers.

Specialized Programs	Unreimbursed Costs
1. Total unreimbursed costs of providing care to patients	(\$1,211,000)
unable to pay, to patients covered under government funded programs, and for medical education, training.	
2. Community Health Education	(\$10,000)
3. Community Programs and Services	(\$108,000)
4. Other Unreimbursed Costs	\$0
5. Total Costs of Providing Community Benefits	(\$1,329,000)

Identification of Additional Non-Hospital Charity Costs

In addition, some hospitals will have non-hospital organizations under its ISDH license are providing community benefits in this fiscal year.

Organization Providing Charity Care	Net Costs of Care
None	\$0

For further information on these initiatives, contact:

Hospital Representative: Mary Roos

Telephone number: 574/259-2431

Web Address Information: www.sjmed.com

ISDH STATISTICAL COMPARISON BETWEEN THIS HOSPITAL AND OTHER HOSPITALS IN ITS PEER GROUP

PERFORMANCE INDICATOR	METHODOLOGY	THIS HOSPITAL'S RESULTS	PEER GROUP AVERAGE
1. # of FTE's	Number of Full Time Equivalents	475	645
2. % of Salary	Salary Expenses divided by Total Expenses	34.9%	39.7%
3. Average Daily Census	Patient Days divided by annual days (365 days)	35.4	58.6
4. Average Length of Stay	Number of Patient Days divided by the Number of Discharges	3.6	4.3
5. Price for Medical/Surgical per stay	Total Medical/Surgical charges divided by Medical/Surgical discharges	\$3,587	\$4,378
6. Gross Price per Discharge	Gross Inpatient Revenue divided by the Total Discharges	\$14,727	\$11,927
7. Outpatient Revenue Percentage	Outpatient Revenue divided by the Gross Total Revenue	54.8%	52.3%

8. Gross Price per Visit	Gross Outpatient Revenue divided by the Total Outpatient Visits	\$720	\$847
9. % of Medicare	Medicare Revenue divided by the Gross Patient Revenue	46.5%	43.1%
10. % of Bad Debt	Bad Debt Expense divided by the Gross Operating Expenses	4.5%	5.5%
11. Charity Allocation	Unreimbursed costs of providing services to patients under adopted charity policy	(\$1,211,000)	(\$1,065,673)
12. Net Margin	Excess of Revenue over Expenses divided by the Total Operating Revenue	-12.8	5.0

Notes:

- 1. NR = Not Reported
- 2. See Statewide Results for definitions of terms.